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APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/583,353 06/19/2006 Tim Prestidge 128452 9813  TITLE OF INVENTION: MACHINE TOOL WORKPIECE INSPECTION SYSTEM  APPLN TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(s) DUE DATE DUE nonprovisional NO \$1510 \$300 \$0 \$1810 07/15/2011 0	maintenance fee notification	ons.	, , ,		<u> </u>					
OLIFF & BERRIDGE, PLC P.O. BOX 320850 ALEXANDRIA, VA 22320-4850  APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10583.353  06/19/2006  Tim Prestidge 128452  9813  TITLE OF INVENTION: MACHINE TOOL WORK PIECE INSPECTION SYSTEM  APPLICATION NO. \$1510  \$300  \$0 \$1810  \$0/15/2011 SHOHRMIN 86880818 10583353  EXAMINER ART UNIT CLASS-SUBCLASS    CIANG, SUNRAY 2121  10-0-195000    CARRES AND SUNRAY 2121    CARRES AND SURRAY ART UNIT CLASS-SUBCLASS   1510, 83 0P of Correspondence address or indication of "Fee Address" of Address from F10/58/17, 80 0-30 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			OPA	10	Note: A certificate of Fec(s) Transmittal. The papers. Each additional take its own certificate.	mailing is certifi il paper, e of mail	can only be used fo cate cannot be used f such as an assignme ling or transmission.	r domestic n or any other nt or formal	nailings of the accompanying drawing, must	
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APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO.  10/583.353 06/19/2006 Tim Prestidge 128452 9813  TITLE OF INVENTION: MACHINE TOOL WORKPIECE INSPECTION SYSTEM  APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE 05/12/2011 SNOHMINI 06/09/09/18 105/03.353  EXAMINER ART UNIT CLASS-SUBCLASS 05/12/2011 SNOHMINI 06/09/09/18 105/03.3533  EXAMINER ART UNIT CLASS-SUBCLASS 05/12/2011 SNOHMINI 06/09/09/18 105/03.3533  EXAMINER ART UNIT CLASS-SUBCLASS 01/12/2011 SNOHMINI 06/09/09/18 105/03.3533  EXAMINER ART UNIT CLASS-SUBCLASS 05/12/2011 SNOHMINI 06/09/09/18 105/03.3533  EXAMINER ART UNIT CLASS-SUBCLASS 05/12/2011 SNOHMINI 06/09/09/18 105/03.35333  EXAMINER ART UNIT CLASS-SUBCLASS 01/12/2011 SNOHMINI 06/09/09/18 105/03/23/23/23/23/23/23/23/23/23/23/23/23/23			(Depos			Depositor's name)				
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CHANG, SUNRAY  2121  700-195000  92 FC:1584  388.88 OP  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  3 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTIE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  Reni shaw PLC  Blease check the appropriate assignee category or categories (will not be printed on the patent):    Sisue Fee   Security	EXAMINER ART UNIT		CLASS-SUBCLASS							
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  Renishaw PLC  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Wotton-under-Edge, United Kingdom  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government of Fee(s): (Please first reapply any previously paid issue fee shown above)  Issue Fee  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies  Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed. Ck# 237361 (\$1810)  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 15-0461 (enclose an extra copy of this form).	Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3						
(A) NAME OF ASSIGNEE Renishaw PLC  (B) RESIDENCE: (CITY and STATE OR COUNTRY) Wotton-under-Edge, United Kingdom  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Governmen  4a. The following fee(s) are submitted: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Payment by credit card. Form PTO-2038 is attached. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number 15-0461 (enclose an extra copy of this form).  5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	3. ASSIGNEE NAME AN	D RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print o	r type)					
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Advance Order - # of Copies The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number 15-0461 (enclose an extra copy of this form).  5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).		. Il	:							
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Date May 11, 2011 Authorized Signature Registration No. \_ 64,667 Kevin Ross Davis Typed or printed name

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